Please type a	phas	sign	(+)	inside	this	ьсх	->	+
---------------	------	------	-----	--------	------	-----	----	---

PTO/SB/08A (10-95)
Approved for use through 10/31/99, OMB 0651-0031
Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

10/810,175

3/26/2004

Seelig

Complete if Known

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE of Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number

Application Number

First Named Inventor

Filing Date

Substitute for form 1449APTO

Sheet

INFORMATION DISCLOSURE STATEMENT BY APPLICANT

(use as many sheets as necessary)

Group Art Unit	3713
Examiner Name	

Attorney Docket Number 619.708

				U.S. PATENT DOCL	JMENTS	
Examiner Cite U.S. Patent Document		No. of Data and Applicate	Date of Publication of	Pages, Columns, Lines, Where Relevant		
		Name of Patentee or Applicant of Cited Document	Cited Document MM-OD-YYYY	where Relevant Passages or Relevant Piqures Appear		
15</td <td>. 1</td> <td>6,287,1</td> <td></td> <td>Dickinson et al.</td> <td>9/11/01</td> <td></td>	. 1	6,287,1		Dickinson et al.	9/11/01	
71		-10-11-11-				
				•		
		<u>, , , , , , , , , , , , , , , , , , , </u>				
	 					-
	 					
		 				
						
		 				
	┼	 				

		***************************************		FOR	EIGN PATENT DOCUMENT	rs		
Examiner Cita Initials' No.'	F	oreign Patent Do	cument .	Name of Pateniae or	Date of Publication of Cited Document MM-DD-YYYY	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	П	
	Office ³	Number	Kind Code ⁵ (if known)				Τ¢	
		1 1						
		1 1						
								_
								4_
								┼
								┼
							<u> </u>	

	// /		······································	
Examiner	17-17		Date	27
	(were	Rection	Considered	120,107
Signature		7000		

*EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

Burden Hour Statement: This form is estimated to take 2.0 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

^{*} Unique citation designation number. 2 See attached Kinds of U.S. Patent Documents. 3 Enter Office that issued the document, by the two-letter code (WIPO Standard ST.3). 4 For Japanese patent documents, the indication of the year of the reign of the Emparor must precede the serial number of the patent document. 5 Kind of document by the appropriate symbols as indicated on the document under WIPO Standard ST. 16 if possible. 4 Applicant is to place a check mark here if English language Translation is attached.